FORM D

SEC Wall Processing Section

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

APR 15 2006

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

Washington, DC SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	1437818
	OMB APPROVAL
1	OMB Number: 3235-0076

OMB APPROVAL					
OMB Number:	3235-0076				
Expires:	. April 30, 2008				
Ferimated average	: burden				

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					

Name of Offering (check if this an amendment and name has changed, and indicate change.) Offering of	Participating Shares by Maverick Neutral, Ltd.
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) UL Type of Filing: New Filing Amendment	LOE
A, BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08046582
Maverick Neutral, Ltd.	<u> </u>
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
c/o Irish Trust Company (Cayman), Ltd., P.O. Box 10658 APO, Harbour Place, 5th Floor, 103 South Church Street, Grand Cayman, Cayman Islands	(345) 949-0658
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Private Investment Company	
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	rase specify): Cayman Islands Exempted Company
Actual or Estimated Date of Incorporation or Organization 12 /04 🔀 Actual Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) F1	□Estimated APR 2 2 2008
GENERAL INSTRUCTIONS	FINANCIAL
Federal: Who must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6).	~
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A t Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if due, on the date it was mailed by United States registered or certified mail to that address.	notice is deemed filed with the U.S. Securities and received at that address after the date on which it is
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	•
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy of bear typed or printed signatures.	signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report the nethe information requested in Part C, and any material changes from the information previously supplied in Parts A with the SEC.	ame of the issuer and offering, any changes thereto, A and B. Part E and the Appendix need not be filed
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of set that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrat made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proposal be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of the state in the proposal states in accordance with state law.	tor in each state where sales are to be, or have been per amount shall accompany this form. This notice
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unlefiling of a federal notice	emption. Conversely, failure to file the ess such exemption is predicated on the

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

A. BASIC IDENTIFICATION DATA
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.
Check Box(cs) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) John Dennis Hunter
Business or Residence Address (Number and Street, City, State, Zip Code) e/o Queensgate Bank & Trust Company, Ltd., P.O. Box 30464 SMB, 103 South Church St., Harbour Place, 5th Floor, George Town, Grand Cayman, Cayman Islands
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner
Full Name (Last name first, if individual) Karla J. Bodden
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Queensgate Bank & Trust Company, Ltd., P.O. Box 30464 SMB, 103 South Church St., Harbour Place, 5th Floor, George Town, Grand Cayman, Cayman Islands Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Lust name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

			-	B. IN	FORMATIO	ON ABOUT	OFFERING					
I. Has th	e issuer sold,				accredited inv					***********	Yes No	
2. What	is the minimu									•••••	\$ 2,000,000 *Administrate discretion to a lower amount Yes No	ccept s
	the offering pe											
similar rem associated p dealer. If n	the informatic uncration for person or ages nore than five ker or dealer o	solicitation o it of a broker (5) persons t	r purchasers i	in connection pistered with	with sales of the SEC and	f securities in Vor with a st	the offering. ate or states,	. If a person list the name	to be listed is of the broke	san ror		
Full Name ((Last name fir	st, if individu	al)									
Business or	Residence Ac	Idress (Numb	per and Street	City, State,	Zip Code							
Name of As	ssociated Brok	er or Dealer										
	hich Person L										☐ All Stat	les
AL	AK	AZ AZ	AR	CA	со	СТ	DE	DC	FL	GA	HI	1D
IL	IN	IA IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	мо
MT	NE NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	ரா	VT	VA	WA	wv	WI	WY	PR
Full Name	(Last name fir	st, if individu	ıai)									_
Business or	r Residence A	ddress (Numl	ber and Street	, City, State,	Zip Code							
Name of A	ssociated Brol	ker or Dealer								·		
	hich Person I										☐ All Sta	tos
	k "All States"				со	СТ	DE	DC	FL	GA	HI	ID
AL	AK DI	AZ	AR	CA KY	LA	ME	MD	MA	MI	MN	MS	МО
IL MT	IN NE	IA NV	KS NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
	(Last name fi	L										·
Business o	r Residence A	ddress (Num	ber and Stree	t, City, State,	Zip Code	<u> </u>						
Name of A	ssociated Bro	ker or Dealer						, <u>, , , , , , , , , , , , , , , , , , </u>			<u> </u>	
	/hich Person I										∏ Ali Sta	te*S
<u> </u>	ck "All States		1	r 	T	ст	DE	DC	FL	GA	HI	ID ·
AL	AK Di	AZ	AR KS	CA KY	CO LA	ME	MD	MA	MI	MN	MS	мо
IL MT	IN NE	iA NV	NH	NJ NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
RI	SC	SD	אד	TX	UT	VT	VA	WA	wv	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount

Type of Security	Aggregate Offering Price*	Amount Afready Sold
Debt	\$	s
Equity	S	\$ <u>11,500,000</u>
☐ Common ☐ Preferred		
Convertible Securities (including warrants).	\$	S
Partnership Interests		S
Other (Specify: Participating Shares)		s
Total		S11,500,000
Answer also in Appendix, Column 3, if filing under ULOE.		on-going, no maximum
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	19	\$11,500,000
Non-accredited Investors	0	SN/A
Total (for filings under Rule 504 only)	N/A	SN/A
Answer also in Appendix, Column 4, if fiting under ULOE.		
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in		
Purt C — Question I.		
Purt C — Question 1. Type of Offering	Type of Security	Dollar Amount Sold
·	Security	Dollar Amount Sold SN/A
Type of Offering	Security N/A	
Type of Offering Rule 505	Security N/A N/A	SN/A
Type of Offering Rule 505 Regulation A	Security N/A N/A N/A	SN/A SN/A
Type of Offering Rule 505 Regulation A Rule 504	Security N/A N/A N/A	SN/A SN/A SN/A
Rule 505	Security N/A N/A N/A	SN/A SN/A SN/A
Regulation A	Security N/A N/A N/A N/A	SN/A SN/A SN/A SN/A
Rule 505	Security N/A N/A N/A N/A	SN/A SN/A SN/A SN/A
Regulation A	Security N/A N/A N/A N/A	SN/A SN/A SN/A SN/A SN/A
Type of Offering Rule 505	Security N/A N/A N/A N/A O	SN/A SN/A SN/A SN/A SN/A SN/A
Type of Offering Rule 505	Security N/A N/A N/A N/A O	SN/A SN/A SN/A SN/A SN/A SN/A SN/A SN/A

1,

	C. OFFERING PRI	ICE, NUMBER OF INVESTORS, EXPENSES	AND USE	OF PROCEEDS	
Oues	tion I and total expenses f	the aggregate offering price given in response to P iumished in response to Part C — Question 4.	a. This		\$11,500,000
used estin	for each of the purposes show hate and check the box to the I the adjusted gross proceeds	adjusted gross proceed to the issuer used or propose vn. If the amount for any purpose is not known, fuleft of the estimate. The total of the payments list to the issuer set forth in response to Part C — Que	ımish an ted must		
				Payments to Officers, Directors, & Atfiliates	Payments to Others
Salar	ries and fees			☐ SN/A	SN/A
Purc	hase of real estate			☐ SN/A	SN/A
Purc	hase, rental or leasing and ins	tallation of machinery and equipment	***************************************	□ SN/A	\$N/A
Cons	struction or leasing of plant be	uildings and facilities		□ \$N/A	\$N/A
Acqı may	uisition of other businesses (ir be used in exchange for the a	actuding the value of securities involved in this offensets or securities of another issuer pursuant to a mo	ering that erger)	□ SN/A	SN/A
Repa	symem of indebtedness			□ SN/A	\$N/A
Wor	king capital			□ SN/A	SN/A
Othe	er (specify):			□ \$N/A	SN/A
				CT CN//	
					7 000
					□\$N/A
Tota	l Payments Listed (column to	tals added)) SN/A
		D. FEDERAL SIGNATURE			
signature const	itutes an undertaking by the is	signed by the undersigned duly authorized person. sauer to the U.S. Securities and Exchange Commis investor pursuant to paragraph (b)(2) of Rule 502.	. If this no sion, upon	otice is filed under R written request of it	Rule 505, the following is staff, the information
lssuer (Print or	Type)	Signature	Date	1	
Maverick Neut	ral, Lid.	Jar. Wegy	April_	, 2008	
Name of Signer	r (Print or Type)	Title of Signer (Print or Type)			
John T. McCaf	ferty	Authorized Signatory of the Company			
			<u> </u>		· · · · · · · · · · · · · · · · · · ·

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

